

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Kentuckians For Strong Leadership

ADDRESS (number and street) P.O. Box 7895

Check if different than previously reported. (ACC)

Louisville KY 40257

2. FEC IDENTIFICATION NUMBER ▼ C C00543256

CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2014 through M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Caleb Crosby

Signature of Treasurer Caleb Crosby [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Kentuckians For Strong Leadership**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="861328.52"/>	<input type="text" value="861328.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="861328.52"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="739300.00"/>	<input type="text" value="739300.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1600628.52"/>	<input type="text" value="1600628.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="349622.62"/>	<input type="text" value="349622.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1251005.90"/>	<input type="text" value="1251005.90"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Kentuckians For Strong Leadership**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	739300.00	739300.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	739300.00	739300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	739300.00	739300.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	739300.00	739300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	739300.00	739300.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	197018.89	197018.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	197018.89	197018.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	152603.73	152603.73
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	349622.62	349622.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	349622.62	349622.62

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	739300.00	739300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	739300.00	739300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	197018.89	197018.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	197018.89	197018.89

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

Unless otherwise noted, none of the expenditures reported are allocable to a candidate. For all Ultimate Vendor Payee disbursements, any transaction below the itemization threshold in the aggregate will not appear as a memo entry.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)  
**A. PAUL ISAAC**

Mailing Address **75 PROSPECT AVENUE**

City State Zip Code  
**LARCHMONT NY 10538-3634**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**ARBITER PARTNERS CAPITAL MANAGEMEN ANALYST**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**50000.00**

Date of Receipt  
**01 / 14 / 2014**

**Transaction ID : SA11.111**

Amount of Each Receipt this Period  
**50000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROBERT A. DAY**

Mailing Address **729 BEL AIR ROAD**

City State Zip Code  
**LOS ANGELES CA 90077-3005**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**TRUST COMPANY OF THE WEST CHAIRMAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**32300.00**

Date of Receipt  
**01 / 28 / 2014**

**Transaction ID : SA11.114**

Amount of Each Receipt this Period  
**32300.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JOHN L. NAU III**

Mailing Address **P.O. BOX 130130**

City State Zip Code  
**HOUSTON TX 77219-0130**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SILVER EAGLE DISTRIBUTORS, LP PRESIDENT & CEO**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**50000.00**

Date of Receipt  
**02 / 05 / 2014**

**Transaction ID : SA11.116**

Amount of Each Receipt this Period  
**50000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **132300.00**

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

**A. H. SCOTT DAVIS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2100 HIGH RIDGE ROAD  
 City State Zip Code  
 LOUISVILLE KY 40207-1128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFO REQUESTED PER BEST EFFORTS INFO REQUESTED PER BEST EFFORTS  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : SA11.121**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. NORTON COMMONS PROFESSIONAL GROUP, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9301 DAYFLOWER STREET  
 City State Zip Code  
 PROSPECT KY 40059-7585  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFO REQUESTED PER BEST EFFORTS INFO REQUESTED PER BEST EFFORTS  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : SA11.120**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C. DAVID A. JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 471 WEST MAIN STREET  
 SUITE 203  
 City State Zip Code  
 LOUISVILLE KY 40202-4291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 125000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : SA11.124**  
 Amount of Each Receipt this Period  
 125000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 127000.00  
**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

**A. REBECCA J. SCOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 251 W. COCONUT PALM ROAD

City BOCA RATON State FL Zip Code 33432-7996

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt: 02 / 26 / 2014  
Transaction ID : SA11.125

Amount of Each Receipt this Period: 15000.00

CONTRIBUTION

**B. MISCHER INVESTMENTS, L.P.**  
Full Name (Last, First, Middle Initial)

Mailing Address 9 GREENWAY PLAZA SUITE 2900

City HOUSTON State TX Zip Code 77046-0923

FEC ID number of contributing federal political committee. **C**

Name of Employer: Occupation:

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt: 02 / 26 / 2014  
Transaction ID : SA11.126

Amount of Each Receipt this Period: 10000.00

CONTRIBUTION

**C. TERRY E. FORCHT**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 SCENIC VIEW DRIVE

City CORBIN State KY Zip Code 40701-2150

FEC ID number of contributing federal political committee. **C**

Name of Employer: **FORCHT BROADCASTING** Occupation: **OWNER/CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt: 03 / 10 / 2014  
Transaction ID : SA11.130

Amount of Each Receipt this Period: 25000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial) <b>A. CURTIS W. MEWBOURNE</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : SA11.131</b>
Mailing Address P.O. BOX 7698		Amount of Each Receipt this Period 100000.00
City TYLER	State TX	Zip Code 75711-7698
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer MEWBOURNE OIL COMPANY	Occupation FOUNDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) <b>B. MATTHEW K. ROSE</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : SA11.128</b>
Mailing Address 1110 POST OAK PLACE		Amount of Each Receipt this Period 25000.00
City WESTLAKE	State TX	Zip Code 76262-9013
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer BNSF RAILWAY	Occupation CHAIRMAN / CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) <b>C. PAUL R. SEEGERS</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : SA11.129</b>
Mailing Address 12720 HILLCREST ROAD SUITE 350		Amount of Each Receipt this Period 5000.00
City DALLAS	State TX	Zip Code 75230-2084
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SEEGERS ENTERPRISES	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)  
**A. DAVID HERRO**  
 Mailing Address 65 EAST GOETHE STREET  
 City State Zip Code  
 CHICAGO IL 60610-2628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HARRIS ASSOCIATES INVESTMENT MANAGEMENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : SA11.135**  
 Amount of Each Receipt this Period  
 50000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROGER HERTOG**  
 Mailing Address 1040 5TH AVENUE  
 City State Zip Code  
 NEW YORK NY 10028-0137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 THE HERTOG FOUNDATION PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : SA11.139**  
 Amount of Each Receipt this Period  
 25000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. HOWARD H. LEACH**  
 Mailing Address 350 ROYAL PALM WAY  
 SUITE 401  
 City State Zip Code  
 PALM BEACH FL 33480-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LEACH CAPITAL, LLC PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : SA11.138**  
 Amount of Each Receipt this Period  
 25000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 100000.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial) <b>A. THOMAS E. MCINERNEY</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : SA11.140</b>
Mailing Address 16 BLUFF POINT		Amount of Each Receipt this Period 50000.00
City WESTPORT	State CT	Zip Code 06880-6902
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION
Name of Employer BLUFF POINT ASSOCIATES	Occupation GENERAL PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) <b>B. JWC III REVOCABLE TRUST</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : SA11.142</b>
Mailing Address 1717 SOUTH BOULDER AVENUE SUITE 400		Amount of Each Receipt this Period 100000.00
City TULSA	State OK	Zip Code 74119-4833
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) <b>C. THOMAS L. PEARSON</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : SA11.143</b>
Mailing Address 6935 E. 116TH ST. S.		Amount of Each Receipt this Period 50000.00
City BIXBY	State OK	Zip Code 74008-8212
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation PRIVATE INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	739300.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	4		

Transaction ID : SB21B.I168

Amount of Each Disbursement this Period

4	1	7	9	.	7	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	4		

Transaction ID : SB21B.I176

Amount of Each Disbursement this Period

3	7	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WIDGETMAKR**

Mailing Address 1593 SPRING HILL ROAD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	4		

Transaction ID : SB21B.I179

Amount of Each Disbursement this Period

3	7	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4	1	7	9	.	7	1
---	---	---	---	---	---	---

3	7	5	.	0	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. MERCHANT E-SOLUTIONS**

Mailing Address 3600 BRIDGE PKWY, STE 102

City REDWOOD CITY State CA Zip Code 94065

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2014

Transaction ID : SB21B.I147

Amount of Each Disbursement this Period

109.95

Full Name (Last, First, Middle Initial)

**B. MEGAN GRAETER**

Mailing Address 2323 GLEN EAGLE DRIVE

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement  
ULTIMATE VENDOR - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2014

Transaction ID : SB21B.I173

Amount of Each Disbursement this Period

87.70

Full Name (Last, First, Middle Initial)

**C. CFC CONSULTING INC**

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement  
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2014

Transaction ID : SB21B.I134

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1697.65

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. INTEGRATED CAMPAIGN SOLUTIONS LLC**

Mailing Address 526 DAROCO AVENUE

City State Zip Code  
CORAL GABLES FL 33146

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 10 / 2014

Transaction ID : SB21B.I144

Amount of Each Disbursement this Period

15069.69

Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 N HILL DRIVE, STE 100

City State Zip Code  
WARRENTON VA 20186

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 17 / 2014

Transaction ID : SB21B.I140

Amount of Each Disbursement this Period

5400.00

Full Name (Last, First, Middle Initial)

**C. VIKING STRATEGIES LLC**

Mailing Address 1200 N VEITCH ST. # 1312

City State Zip Code  
ARLINGTON VA 22201

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2014

Transaction ID : SB21B.I159

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

25469.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. ARCHIMEDIA**

Mailing Address 45 NORTH HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	4

Transaction ID : SB21B.I163

Amount of Each Disbursement this Period

7	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. PNC BANK**

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	4

Transaction ID : SB21B.I169

Amount of Each Disbursement this Period

4	2	1	.	0	9
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	4

Transaction ID : SB21B.I181

Amount of Each Disbursement this Period

3	7	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7	9	2	.	0	9
---	---	---	---	---	---

7	9	2	.	0	9
---	---	---	---	---	---



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. MERCHANT E-SOLUTIONS**

Mailing Address 3600 BRIDGE PKWY, STE 102

City REDWOOD CITY State CA Zip Code 94065

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2014

**Transaction ID : SB21B.I148**

Amount of Each Disbursement this Period

55.72

Full Name (Last, First, Middle Initial)

**B. ARENA COMMUNICATIONS LLC**

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement  
WEBSITE HOSTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2014

**Transaction ID : SB21B.I166**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CFC CONSULTING INC**

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement  
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2014

**Transaction ID : SB21B.I135**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2555.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. INTEGRATED CAMPAIGN SOLUTIONS LLC**

Mailing Address 526 DAROCO AVENUE

City State Zip Code  
CORAL GABLES FL 33146

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2014

Transaction ID : SB21B.I145

Amount of Each Disbursement this Period

9296.33

Full Name (Last, First, Middle Initial)

**B. RUNSWITCH LLC**

Mailing Address 6000 BROWNSBORO PARK BLVD, UNIT F

City State Zip Code  
LOUISVILLE KY 40207

Purpose of Disbursement  
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2014

Transaction ID : SB21B.I155

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX ST, STE 400

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
WEB ADS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2014

Transaction ID : SB21B.I157

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

21796.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. MEGAN GRAETER**

Mailing Address 2323 GLEN EAGLE DRIVE

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement  
ADMINISTRATIVE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

Transaction ID : SB21B.I171

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY**

Mailing Address 1033 NORTH FAIRFAX ST, STE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
WEB ADS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 07 / 2014

Transaction ID : SB21B.I158

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. ARCHIMEDIA**

Mailing Address 45 NORTH HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2014

Transaction ID : SB21B.I164

Amount of Each Disbursement this Period

7500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10100.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 N HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2014

Transaction ID : SB21B.I141

Amount of Each Disbursement this Period

4025.00

Full Name (Last, First, Middle Initial)

**B. HOWARD W. PHILLIPS & CO**

Mailing Address 2555 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2014

Transaction ID : SB21B.I143

Amount of Each Disbursement this Period

14091.89

Full Name (Last, First, Middle Initial)

**C. VIKING STRATEGIES LLC**

Mailing Address 1200 N VEITCH ST. # 1312

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2014

Transaction ID : SB21B.I160

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

23116.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.I170

Amount of Each Disbursement this Period

1584.23
---------

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.I185

Amount of Each Disbursement this Period

375.00
--------

[MEMO ITEM]

**C. US AIRWAYS**

Full Name (Last, First, Middle Initial)

Mailing Address 111 W. RIO SALADO PKWY

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : SB21B.I192

Amount of Each Disbursement this Period

268.00
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1584.23
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. WIDGETMAKR**

Mailing Address 1593 SPRING HILL ROAD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	4

Transaction ID : SB21B.I193

Amount of Each Disbursement this Period

8	0	7	.	5	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DEEP ROOT ANALYTICS LLC**

Mailing Address 1100 WILSON BLVD, STE 950

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	4

Transaction ID : SB21B.I137

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. HARPER POLLING LLC**

Mailing Address 121 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	4

Transaction ID : SB21B.I139

Amount of Each Disbursement this Period

3	4	9	1	.	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2	8	4	9	1	.	0	0
---	---	---	---	---	---	---	---

2	8	4	9	1	.	0	0
---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			03			2014			

**Transaction ID : SB21B.I154**

Amount of Each Disbursement this Period

7.95
------

Full Name (Last, First, Middle Initial)

**B. MERCHANT E-SOLUTIONS**

Mailing Address 3600 BRIDGE PKWY, STE 102

City REDWOOD CITY State CA Zip Code 94065

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			03			2014			

**Transaction ID : SB21B.I149**

Amount of Each Disbursement this Period

55.00
-------

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			05			2014			

**Transaction ID : SB21B.I162**

Amount of Each Disbursement this Period

943.31
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1006.26
---------

**TOTAL** This Period (last page this line number only)..... ▶

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. MEGAN GRAETER**

Mailing Address 2323 GLEN EAGLE DRIVE

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement  
ADMINISTRATIVE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SB21B.I172

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**B. CFC CONSULTING INC**

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement  
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SB21B.I136

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. INTEGRATED CAMPAIGN SOLUTIONS LLC**

Mailing Address 526 DAROCO AVENUE

City CORAL GABLES State FL Zip Code 33146

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : SB21B.I146

Amount of Each Disbursement this Period

8917.96

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10467.96



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. RUNSWITCH LLC**

Mailing Address 6000 BROWNSBORO PARK BLVD, UNIT F

City LOUISVILLE State KY Zip Code 40207

Purpose of Disbursement  
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : SB21B.I156

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. DEEP ROOT ANALYTICS LLC**

Mailing Address 1100 WILSON BLVD, STE 950

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2014

Transaction ID : SB21B.I138

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2014

Transaction ID : SB21B.I153

Amount of Each Disbursement this Period

18125.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

43125.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Kentuckians For Strong Leadership**

Full Name (Last, First, Middle Initial)

**A. ARCHIMEDIA**

Mailing Address 45 NORTH HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	4

Transaction ID : **SB21B.I165**

Amount of Each Disbursement this Period

7	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 N HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	4

Transaction ID : **SB21B.I142**

Amount of Each Disbursement this Period

2	7	7	5	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. VIKING STRATEGIES LLC**

Mailing Address 1200 N VEITCH ST. # 1312

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	4

Transaction ID : **SB21B.I161**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	5	2	7	5	.	0	0
---	---	---	---	---	---	---	---

1	9	6	7	8	.	6	5	3
---	---	---	---	---	---	---	---	---

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Kentuckians For Strong Leadership
FEC IDENTIFICATION NUMBER
C C00543256
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: MAIN STREET MEDIA GROUP
Mailing Address: P.O. BOX 25093
City: ALEXANDRIA VA Zip Code: 25093
Date of Public Distribution/Dissemination: 01/17/2014
Amount: 82465.50
Transaction ID: SE.1
Date of Disbursement or Obligation: 01/15/2014
Purpose of Expenditure: TV / MEDIA PLACEMENT - SEE NOTICE FILED 01/17/14
Category/Type:
Name of Federal Candidate: ALISON LUNDERGAN GRIMES
Office Sought: Senate State: KY
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 152603.73

Full Name of Payee: DMM MEDIA
Mailing Address: 3299 K STREET NW, #200
City: WASHINGTON DC Zip Code: 20007
Date of Public Distribution/Dissemination: 01/17/2014
Amount: 2668.23
Transaction ID: SE.2
Date of Disbursement or Obligation: 01/17/2014
Purpose of Expenditure: TV / MEDIA PRODUCTION - SEE NOTICE FILED 01/17/14
Category/Type:
Name of Federal Candidate: ALISON LUNDERGAN GRIMES
Office Sought: Senate State: KY
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 152603.73

(a) SUBTOTAL of Itemized Independent Expenditures: 85133.73
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: CALEB CROSBY [Electronically Filed] Date: 04/15/2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Kentuckians For Strong Leadership</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00543256
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RICHARD SALES MEDIA LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 07 / 2014
Mailing Address 1702 E HIGHLAND AVE, STE 408	Amount <span style="border: 1px solid black; padding: 2px;">4500.00</span>
City State Zip Code PHOENIX AZ 85016	<b>Transaction ID : SE.3</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 07 / 2014
Purpose of Expenditure WEB VIDEO - SEE NOTICE FILED 02/07/14	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate ALISON LUNDERGAN GRIMES	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: KY
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">152603.73</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee <b>MAIN STREET MEDIA GROUP</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 03 / 28 / 2014
Mailing Address P.O. BOX 25093	Amount <span style="border: 1px solid black; padding: 2px;">62610.00</span>
City State Zip Code ALEXANDRIA VA 25093	<b>Transaction ID : SE.4</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 03 / 26 / 2014
Purpose of Expenditure TV / MEDIA PLACEMENT - SEE NOTICE FILED 03/28/14	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate ALISON LUNDERGAN GRIMES	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ District: _____ State: KY
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">152603.73</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<span style="border: 1px solid black; padding: 2px;">67110.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*CALEB CROSBY*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
04 / 15 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Kentuckians For Strong Leadership</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00543256
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>DMM MEDIA</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>03 / 28 / 2014</b>
Mailing Address <b>3299 K STREET NW, #200</b>	Amount <b>360.00</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20007</b>	<b>Transaction ID : SE.5</b> Date of Disbursement or Obligation MM / DD / YYYY <b>03 / 27 / 2014</b>
Purpose of Expenditure <b>TV / MEDIA PRODUCTION - SEE NOTICE FILED 03/28/14</b> Category/Type	Name of Federal Candidate <b>ALISON LUNDERGAN GRIMES</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <b>KY</b>
Calendar Year-To-Date Per Election for Office Sought <b>152603.73</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Category/Type	Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>360.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>152603.73</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CALEB CROSBY [Electronically Filed] Date **04 / 15 / 2014**

Signature